

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000118034

Entity Name: FLORIDA GULF BANCORP, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

9101 COLLEGE POINTE CT
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

9101 COLLEGE POINTE CT
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 20-5653892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENTI, WILLIAM P
9101 COLLEGE POINTE CT
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VALENTI, WILLIAM P
Address: 9101 COLLEGE POINTE CT
City-St-Zip: FT MYERS, FL 33919

Title: D () Delete
Name: BRETT, JAY A
Address: 9911 CALOOSA YACHT & RACQUET CLUB DR
City-St-Zip: FT MYERS, FL

Title: D () Delete
Name: BURNS, KEVIN M
Address: 4507 SE 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: DWYER, JAMES A
Address: 15781 GREY FRIARS COURT
City-St-Zip: FT MYERS, FL

Title: D () Delete
Name: GRAVINA, AMY B
Address: 1370 GASPARILLA DR
City-St-Zip: FT MYERS, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: HENDRY, ROBERT E
Address: 8672 NOTTINGHAM POINTE WAY
City-St-Zip: FORT MYERS, FL 33912 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN H HODAS

CFO

04/30/2009

Electronic Signature of Signing Officer or Director

Date